

POLITICAL/ISSUE AVAIL REQUEST

DATE: 5/3/2018

REQUESTED BY: Sadler Media

ADDRESS: 12103 Viewcrest Blvd, Studio City, CA 91604

TELEPHONE# 818-506-5443

FAX# :

ON BEHALF OF CANDIDATE/ISSUE: Asif Mahmood

OFFICE/ISSUE: Insurance Commissioner

PARTY AFFILIATION: Democrat

COMMITTEE: Dr. Asif Mahmood for Insurance Commissioner 2018

TREAS./CHAIRMAN: Jane Leiderman

ADDRESS: 1633 Ventura Blvd, Suite 1008, Encino, CA 91436

TELEPHONE# 626-786-4411

FAX# : 626-403-0559

DATES AND TIMES REQUESTED: All

REMARKS:



Dr. Asif Mahmood for Insurance Commissioner 2018
1633 Ventura Blvd., Suite 1008
Encino, CA 91436

2/27/2018

Sheri Sadler
Sadler Strategic Media, Inc.
12103 Viewcrest Road
Studio City, CA 91604

Dear Ms. Sadler:

Please accept this letter as authorization to represent the "Dr. Asif Mahmood for Insurance Commissioner 2018". Our official information is as follows:

Name: Dr. Asif Mahmood for Insurance Commissioner 2018
Address: 1633 Ventura Blvd., Suite 1008, Encino, CA 91436
Phone: (626) 7864411
Fax: (626) 4030559
Name of Chairman:
Name of Treasurer: Jane Leiderman
FEDERAL I.D. # 1401431

Signature (Can be any authorized agent)

Lara Maxey /Campaign Manager

AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

☐ FEDERAL CANDIDATE

☒ STATE/LOCAL CANDIDATE

To Avail Themselves Of The Lowest Unit Charge During A Political Window, Federal Candidates Must Sign The Certification On Page 3

Station and Location:

KGO-TV / San Francisco

Date:

2/5/18

I, Sheri Sadler

being/on behalf of: _____

a legally qualified candidate of the _____

political party for the office of: _____

in the _____

election to be held on: _____

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
see request email					

Attach proposed schedule with charges (if available):

I represent that the payment for the above described broadcast time has been furnished by:

and you are authorized to announce the time as paid for by such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

See Letter of Authorization

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional and other sales practices (not applicable to federal candidates).

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

To Be Signed By Candidate or Authorized Committee

Date Signature

To Be Signed By Station Representative

☐ Accepted

☐ Accepted in Part

☐ Rejected

Signature Printed Name Title